113000092450

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	#)
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WABLAWPLC

Attorneys at Law

Wayne Alan Brown

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E-Mail: wbrown@wabslaw.com

Cell: (516) 532-0653

Monday, February 13, 2017

Via First Class U.S. Mail

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

Re: Elite Senior Home Care LLC, Dissociation

Florida Division of Corporations:

Enclosed herewith please find the following:

- 1. One (1) completed Dissociation form with cover letter for Dissociation of Ms. Delores Garnes; and
- 2. Check payable to Florida Department of State in the amount of \$25.00 to cover the filing fee.

If there are any questions regarding the aforementioned please do not hesitate to contact the undersigned.

Very truly yours,

WAB LAW PLC

Wayne A. Brown, for the firm

Encl.

cc: Christine Mulé

Page 1 of 1

cvr: Harris/Elite 02/07/2017

COVER LETTER

TO:

CR2E079 (2/14)

Registration Section

Division of Corporations Elite Senior Home Care LLC SUBJECT: (Name of Limited Liability Company) The enclosed member, resignation or dissociation and fee(s) are submitted for filing. Please return all correspondence concerning this matter to: Ms. Christine Mule (Contact Person) Elite Senior Home Care LLC (Firm/Company) 3900 Woodlake Blvd., Suite 206 (Address) Greenacres, Florida 33463 (City/State and Zip Code) For further information concerning this matter, please call: Ms. Christine Mule (Area Code & Daytime Telephone Number) (Name of Contact Person) Enclosed please find a check made payable to the Florida Department of State for: □ \$55 Filing Fee & Certified Copy ■ \$25 Filing Fee MAILING ADDRESS: STREET/COURIER ADDRESS: Registration Section Registration Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

DISSOCIATION OR RESIGNATION OF MEMBER, MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

(Pursuant to 605.0216, Florida Statutes)

of State is: Elite Senior Home Care LLC	and and to this limited liability gampany is:	 *
2. The Florida document/registration number a L13000092450	assigned to this infinited hability company is.	
3. The date this member/manager withdrew/re	signed or will withdraw/resign is:	
Delores Garnes	, hereby withdraw/resign as a	
(Print Name of Person Resigning)		
MGRM	CRE AA	7 7
(Print Title)	A A	00 ·
of this limited liability company and affirm t resignation in writing.	he limited liability company has been not the of	f my
Debres Jarnes	ORIO,	
Signature of Dissociating Member or Resi	gning Manager	

Filing Fee:

Certified Copy:

\$25.00 (Required) \$30.00 (Optional)